PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10690552

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			40		100.		Г	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA	-	BASIC FEE	-	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			//minus 20= *		* 2	20	-	X\$ 9=		OR	X\$18=	260	
INDEPENDENT CLAIMS			2 minus 3 = *				1	X43=	<u> </u>		X86=)-	
Мι	ILTIPLE DEPE	NDENT CLAIM P	RESENT				ŀ	+145=	<u> </u>	OR	+290=		
* If	the difference	e in column 1 is	less than zero, enter "0" in co			column 2	L	TOTAL		OR	TOTAL	102	
CLAIMS AS AMENDED - PART II								TOTAL	L	OR	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MI	Minus	***	CL AINA	=		X43=		OR	X86=		
L	FINOT PAESE	INTATION OF INI	JUINTE DE	CINDEINI	CLAIN	<u>.</u>		+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Ind pendent	* NTATION OF MU	Minus	***	CL AINA	=		X43=		OR	X86=		
	FIRST PRESE	INTATION OF INC	CHIPLE DEF	ENDENT	CLAIIVI			+145=		OR	+290=		
								TOTAL DDIT. FEE		OR /	TOTAL ADDIT, FEE		
		(Column 1)		(Colum		(Column 3)	,						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	CLANA	=		X43=		OR	X86=		
	FINST PRESE	NIATION OF MC	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL		
***	f the "Highest Nur	mber Previously Pa ber Previously Paid ber Previously Paid	id For" IN THIS	S SPACE is	less than	n 3, enter "3."		DIT. FEE L I in the appr		. 4	IDDIT. FEE L IMN 1.		